

CASE REPORT OF UTEROINTESTINAL FISTULA

by

NIDHI SHARMA

C. L. GUPTA

and

R. L. WAKHLO

SUMMARY

Traumatic utero-intestinal fistula is interesting, it is being reported.

Case Report

The patient Mrs. K.W.G., aged 65 years, was admitted in S.M.G.S. Hospital, Jammu on 12-11-1982, for faecal discharge per vaginum. The patient had pain lower abdomen along with fever for 6 months and was operated for renal calculi. The fever did not subside after the operation and the pus was then drained from the rectovaginal pouch and dilatation of uterus had also been done at the same time. Soon after that she began passing faeces through the vagina as well as the rectum.

General Examination

Anaemia +, oedema nil, pulse 110/min with ectopic beats, MP 120/80 mm Hg, Chest clear, CVS ectopic beats present.

Abdominally a mass 14 weeks in size rising from the pelvis could be palpated. It was firm and immobile.

On vaginum examination exact size of the uterus could not be made out. A firm mass,

From: Department of Obstetrics and Gynaecology, Government Medical College, Jammu.

Accepted for publication on 17-6-83.

with the uteurs was felt in the suprapubic region. The mobility of the uterus was restricted. The fornices were clear.

On speculum examination the vaginal walls were intact. The faecal matter was seen to be coming through the os of the uterus.

On rectal examination no break in its mucosa was felt.

Management

On opening the abdomen the site of the fistula was seen to be between the sigmoid colon and the fundus of the uterus. Abdominal hysterectomy with bilateral salpingo-oophorectomy along with resection of the sigmoid colon and anastomosis of the gut was performed (Fig. 1). The operation was performed under general anaesthesia. The patient did not come out of anaesthesia following the completion of the operation. The cardiac monitor showed that she had developed sinus tachycardia. She was shifted to the I.C.C. unit for postoperative care. In spite of the intensive treatment given to the patient, her condition worsened. The attendants of the patient took her home against medical advice and she succumbed to heart failure at home within an hour of leaving the hospital.

See Fig. on Art Paper VIII